## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

(0622646

| CLAIMS AS FILED - PART I<br>(Column 1)   |  |   |                        |                               |                              | (Column 2)       |          | SMALL ENTITY TYPE    |                        | OR         | OTHER THAN<br>OR SMALL ENTITY |                        |
|--|--|---|------------------------|-------------------------------|------------------------------|------------------|----------|----------------------|------------------------|------------|-------------------------------|------------------------|
| TOTAL CLAIMS   |  |   | 18                     |                               |                              |                  |          | RATE                 | FEE                    |            | RATE                          | FEE                    |
| FOR  |  |   | NUMBER FILED           |                               | NUMBI                        | R EXTRA          |          | BASIC FEE            | 375.00                 | OR         | BASIC FEE                     | 750.00                 |
| TOTAL CHARGEABLE CLAIMS  |  |   | \\rightarrow minus 20= |                               | • 9-                         |                  |          | X\$ 9=               |                        | OR         | X\$18=                        |                        |
| INDEPENDENT CLAIMS   |  |   | 7 minus 3 =            |                               | * 2                          |                  |          | X42=                 |                        | OR         | X84=                          |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT   |  |   |                        |                               |                              |                  |          | +140=                |                        | OR         | +280=                         |                        |
| * If the difference in column 1 is less than zero, enter   |  |   |                        |                               | "0" in c                     | olumn 2          |          | TOTAL                |                        | OR         | TOTAL                         | 750.                   |
| (Column 1) (Column 2) (Column 2)   |  |   |                        |                               |                              | (Column 3)       | _        | SMALL E              | NTITY                  | OR         | OTHER<br>SMALL                | THAN                   |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                        | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>DUSLY                 | PRESENT<br>EXTRA |          | RATE                 | ADDI-<br>TIONAL<br>FER |            | PIATE                         | ADDI-<br>TIONAL<br>FEE |
|  | Total  | • 16                                      | Minus                  | -2                            | 0                            | =                |          | X\$ 9=               |                        | OR         | X\$18                         |                        |
|  | Independent                                    | NTATION OF MI                             | Minus                  | ***                           | CLAIM                        | =                |          | X42=/                |                        | OR         | X84=                          |                        |
|  | · ·  | INTERIOR INIC                             | JETH CE DE             | LINDEN                        | ·                            |                  | •        | <b>1140=</b>         |                        | OA         | +280=                         |                        |
|  |  |   |                        |                               |                              | 4                | /        | TOTAL<br>ADDIT. FEE  |                        | OR         | TOTAL<br>ADDIT: FEE           |                        |
|  |  | (Column 1)                                |                        | (Colu                         |                              | (Column 3)       | _        |                      |                        |            |                               |                        |
| AMENDMENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                        | NUM<br>PREVI                  | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |          | RATE                 | ADDI-<br>TIONAL<br>FEE |            | RATE                          | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus                  | **                            |                              | =                |          | X\$ 9=               |                        | OR         | X\$18=                        |                        |
|  | Independent                                    | •   | Minus                  | ***                           |                              | =                |          | X42=                 |                        | OR         | X84=                          |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                        |                               |                              |                  | _        |                      |                        |            |                               |                        |
| ·  |  |   |                        |                               |                              |                  |          | +140=                |                        | OR         | +280=                         |                        |
|  |  |   | ***                    |                               |                              |                  |          | TOTAL<br>ADDIT. FEE. |                        | OR         | TOTAL<br>ADDIT: FEE           |                        |
| _  |  | (Column 1)                                |                        |                               | mn 2)                        | (Column 3)       | <u>)</u> |                      |                        | _          |                               |                        |
| AMENDMENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                        | NUM<br>PREVI                  | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |          | RATE                 | ADDI-<br>TIONAL<br>FEE |            | RATE                          | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus                  | **                            |                              | =                |          | X\$ 9=               |                        | OR         | X\$18=                        |                        |
|  | Independent                                    | •   | Minus                  | ***                           |                              | =                |          | X42=                 |                        | Ī          | X84=                          |                        |
| Ľ  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                        |                               |                              |                  |          |                      |                        | OR         |                               |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  |  |   |                        |                               |                              |                  |          |                      |                        | OR         | +280=                         |                        |
| ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter 20.  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ADDIT. FEE |  |   |                        |                               |                              |                  |          |                      | OR                     | ADDIT. FEE |                               |                        |
|  | The 'Highest Nur                               | nber Previously Pa                        | ald For" (Total o      | r Indepeni                    | dent) is the                 | e highest numb   | oer fo   | und in the ap        | propriate bo           | x in c     | olumn 1.                      |                        |